



**JUNE 2005 MONTHLY REPORT**  
**(Updated February 2006)**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.  
June 2005 Monthly Report - Updated February 2006

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
MONTHLY STATISTICS FOR JUNE 2005 MONTH END  
EXECUTIVE SUMMARY**

	June 2005*	December 2004
Bank Summary		
Checkwrite	\$11,313,720.22	\$9,562,019.34
Book Balance(US Bank & State General Account)	\$47,991,033.00	\$50,307,256.00
Enrollment		
Plan 1A	8,000	8,104
Plan 1B	9,683	8,510
Plan 2	1,702	1,727
Total	19,385	18,341
New Applications Received	682	652
Claims		
Claims Processed	115,201	112,480
Average Processing Days	11.64	16.00
Claim Inventory - Over 30 Days Old	2,428	651
Claim Inventory - Total	14,096	8,286
Claims Denied(NonPBM)	9,303	12,797
Claims Denied(PBM)	16,979	8,555
Claim Accuracy Performance	99.06%	100.00%
Customer Service/Policyholder Services		
Number of Calls Received	18,966	11,903
Percentage of Calls Answered	96.50%	86.30%
Written Correspondence - Received	876	948
Written Correspondence - Completed	1,184	949
Written Correspondence - Inventory	344	39
Average Hold Time for Telephone Calls	0.57	5.55

**\*Please note: Due to the transition of HIRSP plan administration services to a new contractor effective April 1, 2005 claims volumes, payments and other operational statistics may be accounted for differently. Care should be used when trying to compare data from prior to April 1, 2005 to data from April 1, 2005 going forward.**

**Also note that adjustments as reported by the previous administrator are no longer being counted in reports found on pages 26, 27 and 28 beginning with April 2005 data.**

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
JUNE 2005 MONTHLY REPORT  
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**Wisconsin Health Insurance Risk-Sharing Plan**  
**Breakdown of Incurred Claims and Earned Premium**  
**by Quarter and Plan**

<b>3Q03</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$20,375,143	\$10,846,522	187.8%	\$799.53	\$425.62
Plan 1B	7,436,020	7,649,161	97.2%	356.20	366.41
Plan 2	4,248,287	2,062,401	206.0%	816.66	396.46
Total	\$32,059,450	\$20,558,083	155.9%	\$621.77	\$398.71
<b>4Q03</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$22,644,063	\$10,825,220	209.2%	\$889.96	\$425.45
Plan 1B	9,584,810	8,013,666	119.6%	436.21	364.71
Plan 2	4,489,406	2,062,818	217.6%	861.86	396.01
Total	\$36,718,279	\$20,901,704	175.7%	\$697.72	\$397.17
<b>1Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$19,671,524	\$10,273,986	191.5%	\$801.68	\$418.70
Plan 1B	9,750,553	8,769,984	111.2%	405.29	364.54
Plan 2	4,014,558	2,060,924	194.8%	768.04	394.28
Total	\$33,436,635	\$21,104,894	158.4%	\$621.23	\$392.12
<b>2Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,817,981	\$10,446,926	208.8%	\$871.60	\$417.34
Plan 1B	11,121,952	9,078,492	122.5%	446.38	364.36
Plan 2	4,879,335	2,092,994	233.1%	928.16	398.13
Total	\$37,819,268	\$21,618,413	174.9%	\$685.07	\$391.60
<b>3Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,311,378	\$11,627,516	183.3%	\$860.09	\$469.27
Plan 1B	11,393,181	10,348,024	110.1%	448.55	407.40
Plan 2	4,920,084	2,438,376	201.8%	947.26	469.46
Total	\$37,624,643	\$24,413,917	154.1%	\$679.49	\$440.91
<b>4Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$25,082,531	\$11,459,604	218.9%	\$1,023.86	\$467.78
Plan 1B	14,538,749	10,461,572	139.0%	565.45	406.88
Plan 2	5,311,264	2,436,761	218.0%	1,025.34	470.42
Total	\$44,932,545	\$24,357,937	184.5%	\$811.20	\$439.75

**NOTES:**

Loss Ratio = Incurred Claims / Earned Premiums

Earned Premium includes Premium Subsidies

Incurred Claims include Provider Contributions

Administrative Expenses are not included in this exhibit

Incurred Claims and Earned Premiums are updated quarterly and restated to reflect the most current information available as of March 31, 2005

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
Financial Report Notes  
For the Period Ending June 30, 2005**

The financial statement values for January-November 2004 in this June Monthly Report have been restated from those found in prior monthly reports. The restatements are due to a HIRSP Board of Governors decision to revise HIRSP's definition of program costs. The definition of program costs that HIRSP has been using since 1998 was based on billed charges less a fixed percentage discount for medical (non-pharmacy) services. The discounts vary by service category and the percentages have not changed since 1998.

Due to rising costs in the HIRSP program, the Board adopted a change in the discounts from roughly an aggregate discount of 20% to an aggregate discount of 30%. As a result, the HIRSP U&C was reduced by a multiple of  $0.875 (1-0.30)/(1-0.20)$ . This change was made retroactively to January 1, 2004. This change is meant to continue through June 30, 2005 when a new methodology for determining future program costs will be implemented.

The following table shows calendar year 2004 under the original basis, the revised basis, and the resulting changes:

<b>HIRSP Summary Impact of Program Changes</b>			
	<b>Original Basis</b>	<b>Revised Basis</b>	<b>Resulting Changes</b>
Total Operating Expenses	\$174,246,511	\$157,076,768	(\$17,169,743)
Required Shares			
Policyholders	\$102,883,919	\$92,582,076	(\$10,301,843)
Providers	36,759,562	33,325,612	(3,433,950)
Insurers	36,759,557	33,325,607	(3,433,950)
Ending Balances			
Policyholders	(\$653,169)	\$9,648,674	\$10,301,843
Providers	12,698,909	(1,036,887)	(13,735,796)
Insurers	1,517,534	4,951,484	3,433,950

The motions adopted by the Board regarding the changes summarized above are as follows:

- 1) Effective January 1, 2004 through June 30, 2005, program costs are to be defined such that the HIRSP medical U&C is 87.5% of the current percentages.
- 2) Convene the Actuarial Advisory Subcommittee for the purpose of advising the FOC and Board regarding a market-based benchmark for program costs for use in establishing the SFY06 Budget.
- 3) The Board acknowledges that the current problem of the growing provider contribution and program costs is a function of several factors including increasing provider charges and provider payment rates not keeping pace with inflation. The Board acknowledges that the above referenced motion is an interim solution and would have recommended a 5% provider payment increase effective March 1, 2005 if not for administrative issues associated with the April 1, 2005 transition of plan administrators. The Board will reduce the SFY06 provider surplus by \$1.5 million to compensate for not changing the provider payment rate effective April 1, 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
Financial Report Notes  
For the Period Ending June 30, 2005**

These monthly reports do not include the June 30, 2002 CAFR<sup>1</sup> (Combined Annual Financial Report) adjustments. When these adjustments are available, the monthly report will reflect these changes. Previously issued monthly reports will not be reissued but the financial statement notes for the current month will summarize the CAFR adjustment.

- 1) **Policyholder Retained Earnings, End of Period (page 3 & 9)**  
The policyholder retained earnings include both assigned and unassigned surplus (see Interim Reconciliation page 6 and 12 for the breakdown)
- 2) **Other Receivables (page 7 & 13)**  
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.
- 3) **Losses Paid or Approved for Payment (page 3 & 9)**  
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

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<sup>1</sup> CAFR is the State of Wisconsin annual financial report published by DOA (Dept. of Admin.) and prepared in accordance with GASB (Governmental Accounting Standards Board).

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
for the Period Ended June 30, 2005 (July - November Restated)  
Fiscal Year 2005**

**Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings**

<b>Operating Revenues</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Year to Date</b>
Gross Premiums	7,872,385	8,059,267	8,197,318	8,098,529	7,994,788	8,143,915	8,239,786	8,033,854	8,203,838	8,038,869	7,720,822	8,114,062	96,717,433
Premium Subsidized	(332,487)	(337,487)	(355,614)	(355,279)	(358,351)	(359,019)	(354,700)	(328,871)	(306,815)	(348,067)	(353,231)	(352,175)	(4,142,096)
Net Premium Revenues	7,539,898	7,721,780	7,841,704	7,743,250	7,636,437	7,784,896	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	92,575,337
Provider Contribution	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	31,626,631
Insurer Assessments	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	32,446,266
<b>Total Operating Revenues</b>	<b>13,053,434</b>	<b>12,407,358</b>	<b>13,210,190</b>	<b>12,171,786</b>	<b>13,395,217</b>	<b>13,913,984</b>	<b>12,856,478</b>	<b>12,758,399</b>	<b>12,985,593</b>	<b>13,412,979</b>	<b>13,164,124</b>	<b>13,318,692</b>	<b>156,648,234</b>
<b>Operating Expenses</b>													
Medical Losses:													
Losses Paid or Approved for Payment <sup>(3)</sup>	9,435,534	7,139,835	5,619,849	10,545,095	8,955,173	12,759,804	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	109,147,480
Increase (Decrease) in Unpaid Losses	1,140,327	(11,402)	3,859,488	(3,260,495)	2,212,678	233,998	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	6,436,550
Deductible Subsidy Paid	56,140	35,944	37,736	60,666	34,034	39,816	59,708	78,706	29,706	53,990	95,684	78,118	660,248
Total Medical Losses	10,632,001	7,164,377	9,517,073	7,345,266	11,201,885	13,033,618	7,623,255	7,681,407	9,036,586	10,328,339	10,311,125	12,369,346	116,244,278
Pharmacy Losses:													
Losses Paid or Approved for Payment <sup>(4)</sup>	3,455,297	5,261,686	3,541,388	3,670,974	3,732,490	3,773,000	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	47,927,335
Increase (Decrease) in Unpaid Losses	553,645	(1,412,550)	361,325	268,803	516,342	702,134	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	(350,806)
Drug Rebates	(91,621)	(136,238)	(229,261)	(107,406)	(108,778)	(172,591)	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(2,009,652)
Subsidy - Coinsurance Out-of-Pocket Max	19,025	20,562	20,660	31,667	20,879	21,711	12,515	12,515	(8,892)	12,663	22,609	30,369	216,283
Total Pharmacy Losses	3,936,346	3,733,460	3,694,112	3,864,038	4,160,933	4,324,254	3,368,241	3,504,684	3,555,019	3,950,724	3,700,482	3,990,867	45,783,160
Total Losses	14,568,347	10,897,837	13,211,185	11,209,304	15,362,818	17,357,872	10,991,496	11,186,091	12,591,605	14,279,063	14,011,607	16,360,213	162,027,438
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	-	-	-	-	-	-	-	-	-	380,950	390,487	593,501	1,364,938
Navitus Admin Fees	-	-	-	-	-	-	-	-	-	103,263	105,375	106,618	315,256
DHFS Admin Fees	38,870	52,788	21,209	22,329	55,715	35,961	23,186	37,147	50,352	18,876	50,258	80,383	487,074
EDS Admin Fees	72,709	71,453	76,389	74,342	78,537	75,430	76,867	75,812	74,950	(182)	6,974	-	683,281
UGS Admin Fees	245,436	239,647	253,435	241,145	241,777	259,593	239,028	241,709	244,304	-	12,500	250	2,218,824
Milliman USA Actuarial Services	10,500	6,857	8,982	8,103	2,846	16,597	22,888	54,942	25,797	35,041	29,084	19,242	240,879
Other Admin Fees	12,075	18,441	28,026	51,993	(28,714)	27,894	18,597	12,287	26,803	3,570	5,810	5,567	182,349
Total Administrative Expenses	379,590	389,186	388,041	397,912	350,161	415,475	380,566	421,897	422,206	541,518	600,488	805,561	5,492,601
Referral fees	8,785	8,798	7,350	8,575	8,785	9,835	7,035	4,607	7,455	9,380	4,725	(665)	84,665
Total Operating Expenses	14,956,722	11,295,821	13,606,576	11,615,791	15,721,764	17,783,182	11,379,097	11,612,595	13,021,266	14,829,961	14,616,820	17,165,109	167,604,704
<b>Net Operating Income (Loss)</b>	<b>(1,903,288)</b>	<b>1,111,537</b>	<b>(396,386)</b>	<b>555,995</b>	<b>(2,326,547)</b>	<b>(3,869,198)</b>	<b>1,477,381</b>	<b>1,145,804</b>	<b>(35,673)</b>	<b>(1,416,982)</b>	<b>(1,452,696)</b>	<b>(3,846,417)</b>	<b>(10,956,470)</b>
<b>Non-Operating Revenues (Expenses)</b>													
Federal Grant	-	-	-	2,222,903	-	-	-	-	-	-	-	-	2,222,903
Investment income	40,452	39,550	42,044	58,615	63,927	76,234	79,968	67,563	92,323	118,962	125,449	104,607	909,694
Total Non-operating Revenues (Expenses)	40,452	39,550	42,044	2,281,518	63,927	76,234	79,968	67,563	92,323	118,962	125,449	104,607	3,132,597
<b>Net Income (Loss)</b>	<b>(1,862,836)</b>	<b>1,151,087</b>	<b>(354,342)</b>	<b>2,837,513</b>	<b>(2,262,620)</b>	<b>(3,792,964)</b>	<b>1,557,349</b>	<b>1,213,367</b>	<b>56,650</b>	<b>(1,298,020)</b>	<b>(1,327,247)</b>	<b>(3,741,810)</b>	<b>(7,823,873)</b>
<b>Additions to Retained Earnings</b>													
<b>Policyholder</b>													
Retained Earnings, Beginning of Period	10,106,007	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	10,106,007
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(957,113)	1,395,914	152,032	2,645,698	(1,312,053)	(2,381,811)	1,575,865	1,252,788	479,775	(681,086)	(784,731)	(1,948,660)	(563,382)
<b>Retained Earnings, End of Period<sup>(1)</sup></b>	<b>9,148,894</b>	<b>10,544,808</b>	<b>10,696,840</b>	<b>13,342,538</b>	<b>12,030,485</b>	<b>9,648,674</b>	<b>11,224,539</b>	<b>12,477,327</b>	<b>12,957,102</b>	<b>12,276,016</b>	<b>11,491,285</b>	<b>9,542,625</b>	<b>9,542,625</b>
<b>Providers</b>													
Retained Earnings, Beginning of Period	883,278	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	883,278
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(349,873)	(442,734)	(231,108)	(335,020)	(259,799)	(301,631)	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	(780,278)	(3,601,799)
<b>Retained Earnings, End of Period</b>	<b>533,405</b>	<b>90,671</b>	<b>(140,437)</b>	<b>(475,457)</b>	<b>(735,256)</b>	<b>(1,036,887)</b>	<b>(1,240,687)</b>	<b>(1,404,428)</b>	<b>(1,777,648)</b>	<b>(1,908,049)</b>	<b>(1,938,243)</b>	<b>(2,718,521)</b>	<b>(2,718,521)</b>
<b>Insurers</b>													
Retained Earnings, Beginning of Period	6,459,308	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	6,459,308
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(480,685)	254,413	(216,870)	619,168	(635,855)	(1,047,995)	257,507	215,541	(29,091)	(419,880)	(394,029)	(904,385)	(2,782,161)
<b>Retained Earnings, End of Period</b>	<b>5,978,623</b>	<b>6,233,036</b>	<b>6,016,166</b>	<b>6,635,334</b>	<b>5,999,479</b>	<b>4,951,484</b>	<b>5,208,991</b>	<b>5,424,532</b>	<b>5,395,441</b>	<b>4,975,561</b>	<b>4,581,532</b>	<b>3,677,147</b>	<b>3,677,147</b>
<b>Unfunded Deductible and Coinsurance Subsidy</b>													
Retained Earnings, Beginning of Period	(223,692)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(223,692)
Current Earnings	(75,165)	(56,506)	(58,396)	(92,333)	(54,913)	(61,527)	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	(108,487)	(876,531)
<b>Retained Earnings, End of Period</b>	<b>(298,857)</b>	<b>(355,363)</b>	<b>(413,759)</b>	<b>(506,092)</b>	<b>(561,005)</b>	<b>(622,532)</b>	<b>(694,755)</b>	<b>(785,976)</b>	<b>(806,790)</b>	<b>(873,443)</b>	<b>(991,736)</b>	<b>(1,100,223)</b>	<b>(1,100,223)</b>
<b>Total Retained Earnings</b>	<b>15,362,065</b>	<b>16,513,152</b>	<b>16,158,810</b>	<b>18,996,323</b>	<b>16,733,703</b>	<b>12,940,739</b>	<b>14,498,088</b>	<b>15,711,455</b>	<b>15,768,105</b>	<b>14,470,085</b>	<b>13,142,838</b>	<b>9,401,028</b>	<b>9,401,028</b>

**Note:** Due to the Board decision to change the definition of program cost on a retrospective basis, various components for July-November 2004 will not match those found in prior monthly reports. Please see the notes provided on page 3 of the Monthly Report for a summary of the changes.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**2005 FISCAL YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES**  
**AS OF JUNE 2005**

MISC REVENUE	JUL 04	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
<b>TOTAL MISC REVENUE</b>	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JUL 04	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	9,875.07	16,390.65	26,325.77	50,293.38	(30,413.90)	25,518.78	16,896.89	10,586.78	25,102.79				150,576.21
LAB Audit Fee	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	2,900.00	5,800.00		24,000.00
Speed Scribe													-
UW Extension													-
NASCHIP	500.00	350.00											850.00
Legal Services													-
Prest & Assoc-Ind Med Review						675.00							675.00
Independent Review										600.00			600.00
Premium Refund Overdraft Fees										70.00	10.00		80.00
Whyte Hirschboeck Dudek, SC												5,567.08	5,567.08
													-
													-
													-
													-
<b>TOTAL MISC ADMIN EXP</b>	<b>12,075.07</b>	<b>18,440.65</b>	<b>28,025.77</b>	<b>51,993.38</b>	<b>(28,713.90)</b>	<b>27,893.78</b>	<b>18,596.89</b>	<b>12,286.78</b>	<b>26,802.79</b>	<b>3,570.00</b>	<b>5,810.00</b>	<b>5,567.08</b>	<b>182,348.29</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



**Wisconsin Health Insurance Risk Sharing Plan  
Fiscal Year 2005 Interim Reconciliation  
As Of June 30, 2005 (July - November Restated)**

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
<b>1. Operating and Administrative Costs under s.149.143(1)</b>													
Medical Losses Paid or Approved for Payment	9,435,534	7,139,835	5,619,849	10,545,095	8,955,173	12,759,804	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	109,147,480
Increase (Decrease) in Unpaid Medical Losses	1,140,327	(11,402)	3,859,488	(3,260,495)	2,212,678	233,998	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	6,436,550
Pharmacy Losses Paid or Approved for Payment	3,455,297	5,261,686	3,541,388	3,670,974	3,732,490	3,773,000	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	47,927,335
Increase (Decrease) in Unpaid Pharmacy Losses	553,645	(1,412,550)	361,325	268,803	516,342	702,134	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	(350,806)
Drug Rebates	(91,621)	(136,238)	(229,261)	(107,406)	(108,778)	(172,591)	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(2,009,652)
Total Administrative Expenses	388,375	397,984	395,391	406,487	358,946	425,310	387,601	426,504	429,661	550,898	605,213	804,896	5,577,266
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	14,881,557	11,239,315	13,548,180	11,523,458	15,666,851	17,721,655	11,306,874	11,521,374	13,000,452	14,763,308	14,498,527	17,056,622	166,728,173
<b>2. Adjustments to Operating and Administrative Costs</b>													
Total Non-operating Revenue (Expense)	40,452	39,550	42,044	2,281,518	63,927	76,234	79,968	67,563	92,323	118,962	125,449	104,607	3,132,597
<b>3. Total Fiscal Year Program Costs to be Split 60% 20% 20%</b>	14,841,105	11,199,765	13,506,136	9,241,940	15,602,924	17,645,421	11,226,906	11,453,811	12,908,129	14,644,346	14,373,078	16,952,015	163,595,576
<b>4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)</b>													
Funding Shares													
60% Policyholders	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	98,157,346
20% Providers	2,968,221	2,239,953	2,701,227	1,848,388	3,120,585	3,529,084	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	32,719,115
20% Insurers	2,968,221	2,239,953	2,701,227	1,848,388	3,120,585	3,529,084	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	32,719,115
<b>5. Subsidy Funding Shares</b>													
Premium subsidies	332,487	337,487	355,614	355,279	358,351	359,019	354,700	328,871	306,815	348,067	353,231	352,175	4,142,096
Deductible Subsidies	56,140	35,944	37,736	60,666	34,034	39,816	59,708	78,706	29,706	53,990	95,684	78,118	660,248
Subsidy - coinsurance out-of-pocket Max	19,025	20,562	20,660	31,667	20,879	21,711	12,515	12,515	(8,892)	12,663	22,609	30,369	216,283
Total Subsidies	407,652	393,993	414,010	447,612	413,264	420,546	426,923	420,092	327,629	414,720	471,524	460,662	5,018,627
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	203,826	196,997	207,005	223,806	206,632	210,273	213,462	210,046	163,815	207,360	235,762	230,331	2,509,315
Insurers	203,826	196,996	207,005	223,806	206,632	210,273	213,461	210,046	163,814	207,360	235,762	230,331	2,509,312
<b>6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)</b>													
Policyholders	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	98,157,346
Providers	3,172,047	2,436,950	2,908,232	2,072,194	3,327,217	3,739,357	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	3,620,734	35,228,430
Insurers	3,172,047	2,436,949	2,908,232	2,072,194	3,327,217	3,739,357	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	3,620,734	35,228,427
<b>7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)</b>													
Policyholders													
Premium	7,539,898	7,721,780	7,841,704	7,743,250	7,636,437	7,784,896	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	92,575,337
Premium and Deductible Subsidies Credited to Policyholders	407,652	393,993	414,010	447,612	413,264	420,546	426,923	420,092	327,629	414,720	471,524	460,662	5,018,627
Subtotal	7,947,550	8,115,773	8,255,714	8,190,862	8,049,701	8,205,442	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	8,222,549	97,593,964
Providers	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	31,626,631
Insurers	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	32,446,266
Total	13,461,086	12,801,351	13,624,200	12,619,398	13,808,481	14,334,530	13,283,401	13,178,491	13,313,222	13,827,699	13,635,648	13,779,354	161,666,861

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2005**

<b>Policyholders</b>													
Prior Period Surplus / (Deficit)	10,106,007	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	10,106,007
Premium (Including Premium and Deductible Subsidies)	7,947,550	8,115,773	8,255,714	8,190,862	8,049,701	8,205,442	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	8,222,549	97,593,964
Less Cost	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	98,157,346
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(957,113)	1,395,914	152,032	2,645,698	(1,312,053)	(2,381,811)	1,575,865	1,252,788	479,775	(681,086)	(784,731)	(1,948,660)	(563,382)
Ending Surplus / (Deficit)	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	9,542,625
Assigned Surplus to SFY 2005	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	9,542,625
<b>Providers</b>													
Prior Period Surplus / (Deficit)	883,278	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	883,278
Contribution	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	31,626,631
Less Cost	3,172,047	2,436,950	2,908,232	2,072,194	3,327,217	3,739,357	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	3,620,734	35,228,430
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(349,873)	(442,734)	(231,108)	(335,020)	(259,799)	(301,631)	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	(780,278)	(3,601,799)
Ending Surplus / (Deficit)	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(2,718,521)
<b>Insurers</b>													
Prior Period Surplus / (Deficit)	6,459,308	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	6,459,308
Assessment	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	32,446,266
Less Cost	3,172,047	2,436,949	2,908,232	2,072,194	3,327,217	3,739,357	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	3,620,734	35,228,427
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(480,685)	254,413	(216,870)	619,168	(635,855)	(1,047,995)	257,507	215,541	(29,091)	(419,880)	(394,029)	(904,385)	(2,782,161)
Ending Surplus / (Deficit)	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	3,677,147
<b>Unfunded Deductible and Coinsurance Subsidy</b>													
Prior Period Surplus / (Deficit)	(223,692)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(223,692)
Monthly Change	(75,165)	(56,506)	(58,396)	(92,333)	(54,913)	(61,527)	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	(108,487)	(876,531)
Ending Surplus / (Deficit)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,100,223)
Total HIRSP Retained Earnings	15,362,065	16,513,152	16,158,810	18,996,323	16,733,703	12,940,739	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	9,401,028	9,401,028

**Note: Due to the Board decision to change the definition of program cost on a retrospective basis, various components for July-November 2004 will not match those found in prior monthly reports. Please see the notes provided on page 3 of the Monthly Report for a summary of the changes.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan**  
**June 30, 2005 (July - November Restated)**  
**Fiscal Year 2005**

**Unaudited Balance Sheet**

<b>Assets</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>
Cash and Cash Equivalents	44,175,497	43,792,481	55,529,616	53,382,423	45,505,246	50,307,256	43,348,568	47,057,865	53,789,891	57,009,607	48,034,750	47,991,033
Other Receivables <sup>(2)</sup>	39,541	109,277	138,752	200,118	136,931	111,735	96,643	125,560	94,016	1,742,701	1,472,644	1,234,188
Drug Rebates Receivable	694,465	830,703	1,059,964	1,167,370	1,276,148	1,124,746	1,246,751	1,051,895	1,282,340	1,496,835	1,344,382	1,586,548
Assessments Receivable	2,781,901	896,397	348,845	742,609	516,473	641,364	3,357,262	94,485	217,131	97,932	85,013	85,013
Prepaid Items	57,739	71,349	45,023	34,879	95,293	69,774	52,878	42,291	17,188	1,280	-	-
<b>Total Assets</b>	<b>47,749,143</b>	<b>45,700,207</b>	<b>57,122,200</b>	<b>55,527,399</b>	<b>47,530,091</b>	<b>52,254,875</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,566</b>	<b>60,348,355</b>	<b>50,936,789</b>	<b>50,896,782</b>
<b>Liabilities and Fund Equity</b>												
Liabilities:												
Unpaid Medical loss Liabilities	16,129,059	16,120,582	18,992,225	16,540,725	18,210,671	18,388,346	17,498,548	16,751,485	18,285,381	21,908,176	21,560,577	20,085,992
Unpaid Prescription Drug Loss Liabilities	2,198,353	785,803	1,147,128	1,415,931	1,932,273	2,634,407	2,456,132	2,572,946	965,110	2,584,048	2,863,469	3,033,333
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000
Unearned Premiums	12,626,044	6,831,139	16,957,036	12,608,063	6,784,926	16,833,222	12,599,991	7,023,489	16,764,621	14,630,761	9,063,254	17,186,962
Unearned Assessments	-	3,966,257	2,604,678	4,463,813	2,605,723	-	2,260	5,010,790	2,537,883	5,432,699	2,716,349	-
Accounts Payable and Other Accrued Liabilities	773,622	823,274	602,323	842,544	602,795	798,161	387,083	641,931	419,466	662,586	930,302	529,467
<b>Total Liabilities</b>	<b>32,387,078</b>	<b>29,187,055</b>	<b>40,963,390</b>	<b>36,531,076</b>	<b>30,796,388</b>	<b>39,314,136</b>	<b>33,604,014</b>	<b>32,660,641</b>	<b>39,632,461</b>	<b>45,878,270</b>	<b>37,793,951</b>	<b>41,495,754</b>
Fund Equity:												
Policyholder	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625
Providers	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)
Insurers	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147
Unfunded Deductible and Coinsurance Subsidy	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)
<b>Total Retained Earnings</b>	<b>15,362,065</b>	<b>16,513,152</b>	<b>16,158,810</b>	<b>18,996,323</b>	<b>16,733,703</b>	<b>12,940,739</b>	<b>14,498,088</b>	<b>15,711,455</b>	<b>15,768,105</b>	<b>14,470,085</b>	<b>13,142,838</b>	<b>9,401,028</b>
<b>Total Liabilities and Fund Equity</b>	<b>47,749,143</b>	<b>45,700,207</b>	<b>57,122,200</b>	<b>55,527,399</b>	<b>47,530,091</b>	<b>52,254,875</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,566</b>	<b>60,348,355</b>	<b>50,936,789</b>	<b>50,896,782</b>

**Note Due to the Board decision to change the definition of program cost on a retrospective basis, the fund equity components for July-November 2004 will not match those found in prior monthly reports. Please see the notes provided on page 3 of the Monthly Report for a summary of the changes.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**MONTHLY PROVIDER CONTRIBUTION REPORT**  
**AS OF JUNE 2005 MONTH END(6/28/2005)**

Provider Share Calculation for the Current Month - Claims by Claim Type					
Regular Claims					
Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Professional	\$ 8,054,482.19	36.0%	\$ 5,158,895.84	\$ 3,457,613.06	\$ 1,701,282.78
Hospital Outpatient	\$ 3,879,956.30	27.5%	\$ 2,814,442.70	\$ 2,573,694.42	\$ 240,748.28
Hospital Inpatient	\$ 9,857,799.37	28.1%	\$ 7,086,771.97	\$ 5,792,205.34	\$ 1,294,566.63
Nursing Home	\$ 44,682.56	23.9%	\$ 34,012.36	\$ 35,664.63	\$ (1,652.27)
Other	\$ 842,461.07	23.9%	\$ 641,281.37	\$ 592,696.79	\$ 48,584.58
Total	\$ 22,679,381.49		\$ 15,735,404.24	\$ 12,451,874.24	\$ 3,283,530.00

Crossover Claims					
Claim Type	Medicare Allowed Charges	Medicare Paid	HIRSP Paid	HIRSP Deductible/ Coinsurance	Provider Share
Professional	\$ 660,231.98	\$ 481,262.83	\$ 134,854.63	\$ 42,313.96	\$ 1,800.56
Hospital Outpatient	\$ 694,886.26	\$ 517,776.56	\$ 153,003.10	\$ 23,670.61	\$ 435.99
Hospital Inpatient	\$ 1,031,403.05	\$ 904,299.79	\$ 119,764.82	\$ 6,500.44	\$ 838.00
Nursing Home	\$ 95,340.87	\$ 71,821.50	\$ 16,330.13	\$ 121.24	\$ 7,068.00
Other	\$ 234,719.70	\$ 162,723.73	\$ 61,926.93	\$ 9,114.02	\$ 955.02
Total	\$ 2,716,581.86	\$ 2,137,884.41	\$ 485,879.61	\$ 81,720.27	\$ 11,097.57

Provider Contribution on the Increase (Decrease) in Unpaid Losses	\$ (454,172.00)
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Total Provider Contribution Non-Pharmacy	\$ 2,840,455.57
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Pharmacy Claims					
Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Prescription Drug not processed by PBM	\$ -	0.0%			\$ -
Prescription Drug processed by PBM	\$ 6,007,900.60	0.0%	\$ 4,436,954.81	\$ 4,436,954.81	\$ -
Total Provider Contribution Pharmacy	\$ 6,007,900.60		\$ 4,436,954.81	\$ 4,436,954.81	\$ -

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
for the Period Ended July 31, 2005  
Calendar Year 2005**

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings													
Operating Revenues	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	8,239,786	8,033,854	8,203,838	8,038,869	7,720,822	8,114,062	8,889,521	-	-	-	-	-	57,240,752
Premium Subsidized	(354,700)	(328,871)	(306,815)	(348,067)	(353,231)	(352,175)	(414,793)	-	-	-	-	-	(2,458,652)
Net Premium Revenues	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	8,474,728	-	-	-	-	-	54,782,100
Provider Contribution	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	-	-	-	-	-	18,369,175
Insurer Assessments	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	-	-	-	-	-	19,538,018
<b>Total Operating Revenues</b>	<b>12,856,478</b>	<b>12,758,399</b>	<b>12,985,593</b>	<b>13,412,979</b>	<b>13,164,124</b>	<b>13,318,692</b>	<b>14,193,028</b>	-	-	-	-	-	<b>92,689,293</b>
Operating Expenses	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Medical Losses:													
Losses Paid or Approved for Payment <sup>(3)</sup>	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	8,968,093	-	-	-	-	-	63,660,283
Increase (Decrease) in Unpaid Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	346,665	-	-	-	-	-	2,608,621
Deductible Subsidy Paid	59,708	78,706	29,706	53,990	95,684	78,118	48,493	-	-	-	-	-	444,405
Total Medical Losses	7,623,255	7,681,407	9,036,586	10,328,339	10,311,125	12,369,346	9,363,251	-	-	-	-	-	66,713,309
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	3,648,421	-	-	-	-	-	28,140,921
Increase (Decrease) in Unpaid Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	79,933	-	-	-	-	-	(1,260,572)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(230,293)	-	-	-	-	-	(1,394,050)
Subsidy - Coinsurance Out-of-Pocket Max	12,515	12,515	(8,892)	12,663	22,609	30,369	33,131	-	-	-	-	-	114,910
Total Pharmacy Losses	3,368,241	3,504,684	3,555,019	3,950,724	3,700,482	3,990,867	3,531,192	-	-	-	-	-	25,601,209
Total Losses	10,991,496	11,186,091	12,591,605	14,279,063	14,011,607	16,360,213	12,894,443	-	-	-	-	-	92,314,518
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	-	-	-	380,950	390,487	593,501	402,149	-	-	-	-	-	1,767,087
Navigus Admin Fees	-	-	-	103,263	105,375	106,618	107,223	-	-	-	-	-	422,479
DHFS Admin Fees	23,186	37,147	50,352	18,876	50,258	80,383	38,244	-	-	-	-	-	298,446
EDS Admin Fees	78,867	75,812	74,950	(182)	6,974	-	-	-	-	-	-	-	234,421
UGS Admin Fees	239,028	241,709	244,304	-	12,500	250	-	-	-	-	-	-	737,791
Milliman USA Actuarial Services	22,888	54,942	25,797	35,041	29,084	19,242	18,329	-	-	-	-	-	205,323
Other Admin Fees	18,597	12,287	26,803	3,570	5,810	5,567	-	-	-	-	-	-	72,634
Total Administrative Expenses	380,566	421,897	422,206	541,518	600,488	805,561	565,945	-	-	-	-	-	3,738,181
Referral fees	7,035	4,607	7,455	9,380	4,725	(665)	5,390	-	-	-	-	-	37,927
Total Operating Expenses	11,379,097	11,612,595	13,021,266	14,829,961	14,616,820	17,165,109	13,465,778	-	-	-	-	-	96,090,626
<b>Net Operating Income (Loss)</b>	<b>1,477,381</b>	<b>1,145,804</b>	<b>(35,673)</b>	<b>(1,416,982)</b>	<b>(1,452,696)</b>	<b>(3,846,417)</b>	<b>727,250</b>	-	-	-	-	-	<b>(3,401,333)</b>
Non-Operating Revenues (Expenses)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment income	79,968	67,563	92,323	118,962	125,449	104,607	122,541	-	-	-	-	-	711,413
Total Non-operating Revenues (Expenses)	79,968	67,563	92,323	118,962	125,449	104,607	122,541	-	-	-	-	-	711,413
<b>Net Income (Loss)</b>	<b>1,557,349</b>	<b>1,213,367</b>	<b>56,650</b>	<b>(1,298,020)</b>	<b>(1,327,247)</b>	<b>(3,741,810)</b>	<b>849,791</b>	-	-	-	-	-	<b>(2,689,920)</b>
Additions to Retained Earnings	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Policyholder													
Retained Earnings, Beginning of Period	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	-	-	-	-	-	9,648,674
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,575,865	1,252,788	479,775	(681,086)	(784,731)	(1,948,660)	1,014,178	-	-	-	-	-	908,129
<b>Retained Earnings, End of Period<sup>(1)</sup></b>	<b>11,224,539</b>	<b>12,477,327</b>	<b>12,957,102</b>	<b>12,276,016</b>	<b>11,491,285</b>	<b>9,542,625</b>	<b>10,556,803</b>	-	-	-	-	-	<b>10,556,803</b>
Providers													
Retained Earnings, Beginning of Period	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	-	-	-	-	-	(1,036,887)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	(780,278)	(422,156)	-	-	-	-	-	(2,103,790)
<b>Retained Earnings, End of Period</b>	<b>(1,240,687)</b>	<b>(1,404,428)</b>	<b>(1,777,648)</b>	<b>(1,908,049)</b>	<b>(1,938,243)</b>	<b>(2,718,521)</b>	<b>(3,140,677)</b>	-	-	-	-	-	<b>(3,140,677)</b>
Insurers													
Retained Earnings, Beginning of Period	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	-	-	-	-	-	4,951,484
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	257,507	215,541	(29,091)	(419,880)	(394,029)	(904,385)	339,393	-	-	-	-	-	(934,944)
<b>Retained Earnings, End of Period</b>	<b>5,208,991</b>	<b>5,424,532</b>	<b>5,395,441</b>	<b>4,975,561</b>	<b>4,581,532</b>	<b>3,677,147</b>	<b>4,016,540</b>	-	-	-	-	-	<b>4,016,540</b>
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	-	-	-	-	-	(622,532)
Current Earnings	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	(108,487)	(81,624)	-	-	-	-	-	(559,315)
<b>Retained Earnings, End of Period</b>	<b>(694,755)</b>	<b>(785,976)</b>	<b>(806,790)</b>	<b>(873,443)</b>	<b>(991,736)</b>	<b>(1,100,223)</b>	<b>(1,181,847)</b>	-	-	-	-	-	<b>(1,181,847)</b>
<b>Total Retained Earnings</b>	<b>14,498,088</b>	<b>15,711,455</b>	<b>15,768,105</b>	<b>14,470,085</b>	<b>13,142,838</b>	<b>9,401,028</b>	<b>10,250,819</b>	-	-	-	-	-	<b>10,250,819</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**2005 CALENDAR YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES**  
**AS OF JULY 2005**

MISC REVENUE	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
<b>TOTAL MISC REVENUE</b>	-	-	-	-	-	-	-	-	-	-	-	-	-
MISC ADMIN EXP	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	16,896.89	10,586.78	25,102.79										52,586.46
LAB Audit Fee	1,700.00	1,700.00	1,700.00	2,900.00	5,800.00								13,800.00
Speed Scribe													-
UW Extension													-
NASCHIP													-
Legal Services													-
Prest & Assoc-Ind Med Review													-
Independent Review				600.00									600.00
Premium Refund Overdraft Fees				70.00	10.00								80.00
Whyte Hirschboeck Dudek, SC						5,567.08							5,567.08
													-
													-
													-
													-
<b>TOTAL MISC ADMIN EXP</b>	<b>18,596.89</b>	<b>12,286.78</b>	<b>26,802.79</b>	<b>3,570.00</b>	<b>5,810.00</b>	<b>5,567.08</b>	-	-	-	-	-	-	<b>72,633.54</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan**  
**Calendar Year 2005 Interim Reconciliation**  
**As Of July 31, 2005**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
<b>1. Operating and Administrative Costs under s.149.143(1)</b>													
Medical Losses Paid or Approved for Payment	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	8,968,093	-	-	-	-	-	63,660,283
Increase (Decrease) in Unpaid Medical Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	346,665	-	-	-	-	-	2,608,621
Pharmacy Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	3,648,421	-	-	-	-	-	28,140,921
Increase (Decrease) in Unpaid Pharmacy Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	79,933	-	-	-	-	-	(1,260,572)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(230,293)	-	-	-	-	-	(1,394,050)
Total Administrative Expenses	387,601	426,504	429,661	550,898	605,213	804,896	571,335	-	-	-	-	-	3,776,108
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	11,306,874	11,521,374	13,000,452	14,763,308	14,498,527	17,056,622	13,384,154	-	-	-	-	-	95,531,311
<b>2. Adjustments to Operating and Administrative Costs</b>													
Total Non-operating Revenue (Expense)	79,968	67,563	92,323	118,962	125,449	104,607	122,541	-	-	-	-	-	711,413
<b>3. Total Fiscal Year Program Costs to be Split 60% 20% 20%</b>	11,226,906	11,453,811	12,908,129	14,644,346	14,373,078	16,952,015	13,261,613	-	-	-	-	-	94,819,898
<b>4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)</b>													
Funding Shares													
60% Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	-	-	-	-	-	56,891,938
20% Providers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	2,652,323	-	-	-	-	-	18,963,980
20% Insurers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	2,652,323	-	-	-	-	-	18,963,980
<b>5. Subsidy Funding Shares</b>													
Premium subsidies	354,700	328,871	306,815	348,067	353,231	352,175	414,793	-	-	-	-	-	2,458,652
Deductible Subsidies	59,708	78,706	29,706	53,990	95,684	78,118	48,493	-	-	-	-	-	444,405
Subsidy - coinsurance out-of-pocket Max	12,515	12,515	(8,892)	12,663	22,609	30,369	33,131	-	-	-	-	-	114,910
Total Subsidies	426,923	420,092	327,629	414,720	471,524	460,662	496,417	-	-	-	-	-	3,017,967
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	213,462	210,046	163,815	207,360	235,762	230,331	248,209	-	-	-	-	-	1,508,985
Insurers	213,461	210,046	163,814	207,360	235,762	230,331	248,208	-	-	-	-	-	1,508,982
<b>6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)</b>													
Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	-	-	-	-	-	56,891,938
Providers	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	3,620,734	2,900,532	-	-	-	-	-	20,472,965
Insurers	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	3,620,734	2,900,531	-	-	-	-	-	20,472,962
<b>7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)</b>													
Policyholders													
Premium	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	8,474,728	-	-	-	-	-	54,782,100
Premium and Deductible Subsidies Credited to Policyholders	426,923	420,092	327,629	414,720	471,524	460,662	496,417	-	-	-	-	-	3,017,967
Subtotal	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	8,222,549	8,971,145	-	-	-	-	-	57,800,067
Providers	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	-	-	-	-	-	18,369,175
Insurers	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	-	-	-	-	-	19,538,018
Total	13,283,401	13,178,491	13,313,222	13,827,699	13,635,648	13,779,354	14,689,445	-	-	-	-	-	95,707,260

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

[illegible]



Wisconsin Health Insurance Risk Sharing Plan  
June 30, 2005  
Calendar Year 2005

Unaudited Balance Sheet

Assets	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Cash and Cash Equivalents	43,348,568	47,057,865	53,789,891	57,009,607	48,034,750	47,991,033	-	-	-	-	-	-
Other Receivables <sup>(2)</sup>	96,643	125,560	94,016	1,742,701	1,472,644	1,234,188	-	-	-	-	-	-
Drug Rebates Receivable	1,246,751	1,051,895	1,282,340	1,496,835	1,344,382	1,586,548	-	-	-	-	-	-
Assessments Receivable	3,357,262	94,485	217,131	97,932	85,013	85,013	-	-	-	-	-	-
Prepaid Items	52,878	42,291	17,188	1,280	-	-	-	-	-	-	-	-
<b>Total Assets</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,566</b>	<b>60,348,355</b>	<b>50,936,789</b>	<b>50,896,782</b>	-	-	-	-	-	-
Liabilities and Fund Equity	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Liabilities:												
Unpaid Medical loss Liabilities	17,498,548	16,751,485	18,285,381	21,908,176	21,560,577	20,085,992	-	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,456,132	2,572,946	965,110	2,584,048	2,863,469	3,033,333	-	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	-	-	-	-	-	-
Unearned Premiums	12,599,991	7,023,489	16,764,621	14,630,761	9,063,254	17,186,962	-	-	-	-	-	-
Unearned Assessments	2,260	5,010,790	2,537,883	5,432,699	2,716,349	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	387,083	641,931	419,466	662,586	930,302	529,467	-	-	-	-	-	-
<b>Total Liabilities</b>	<b>33,604,014</b>	<b>32,660,641</b>	<b>39,632,461</b>	<b>45,878,270</b>	<b>37,793,951</b>	<b>41,495,754</b>	-	-	-	-	-	-
Fund Equity:												
Policyholder	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	-	-	-	-	-	-
Providers	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	-	-	-	-	-	-
Insurers	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	-	-	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	-	-	-	-	-	-
<b>Total Retained Earnings</b>	<b>14,498,088</b>	<b>15,711,455</b>	<b>15,768,105</b>	<b>14,470,085</b>	<b>13,142,838</b>	<b>9,401,028</b>	-	-	-	-	-	-
<b>Total Liabilities and Fund Equity</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,566</b>	<b>60,348,355</b>	<b>50,936,789</b>	<b>50,896,782</b>	-	-	-	-	-	-

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**

**EARNED PREMIUM**

**FISCAL YEAR 2005**

<b>EARNED PREMIUM</b>	
<b>MONTH</b>	<b>FY 05</b>
JUL	7,539,898
AUG	7,721,780
SEP	7,841,704
OCT	7,743,250
NOV	7,636,437
DEC	7,784,896
JAN	7,885,086
FEB	7,704,983
MAR	7,897,023
APR	7,690,802
MAY	7,367,591
JUN	7,761,887
<b>TOTAL</b>	<b>\$92,575,337</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan**  
**January 2005 Assessment Status**

Total Assessment Amount: \$16,481,262.21 \$8,240,631.04			1st Installment Due 03/01/2005 Assessment Amount: \$8,240,631.17		2nd Installment Due 05/01/2005 Assessment Amount:	
Period Ending	Payments Received	A/R Balance	Payments Received	A/R Balance	Payments Received	A/R Balance
2005 01	\$2,711.96	\$16,478,550.25	\$1,355.99	\$8,239,275.18	\$1,355.97	\$8,239,275.07
2005 02	\$10,614,378.03	\$5,864,172.22	\$8,133,345.66	\$105,929.52	\$2,481,032.37	\$5,758,242.70
2005 03	\$120,796.35	\$5,743,375.87	\$65,302.23	\$40,627.29	\$55,494.12	\$5,702,748.58
2005 04	\$5,730,364.43	\$13,011.44	\$40,581.38	\$45.91	\$5,689,783.05	\$12,965.53
2005 05	\$12,918.97	\$92.47	\$0.00	\$45.91	\$12,918.97	\$46.56
<b>Grand Total</b>	<b>\$16,481,169.74</b>	<b>\$92.47</b>	<b>\$8,240,585.26</b>	<b>\$45.91</b>	<b>\$8,240,584.48</b>	<b>\$46.56</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## *Monthly Applicant Activity For June 2005*

Number of Applications Pending	May	671
Number of Applications Received	June	682
Number of Applications Rejected	June	119
Number of Applications Closed	June	209
Number of Applications Pending	June	320
Number of Applications Approved	June	705

### **Detail of Applications Rejected**

Eligible for Group Health Coverage	8
Current Medicaid Coverage	1
Not a Wisconsin Resident	5
Did not Qualify for Lost Employer Coverage	9
65 or Older	2
Previous HIRSP < 12 Months Ago	1
Currently Covered by Other Insurance	47
No Medical Reason	46
Insufficient Premium Submitted	0
Total	119

### **Detail of Applications Closed**

Applicant Request	23
Proper Eligibility Requested, never received	179
Application Data Requested, never received	7
Total	209

Due to a programming error, the pending application numbers in this report are overstated.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Monthly Applicant Activity

June, 2005

A.	Medicare Eligible	9
B.	HIV +	4
C.	Eligible Individual	257
D.	Letter of Medical Eligibility	435
1.	Letter of Rejection By:	
	American Family	18
	American Medical Security Group	23
	American Republic	5
	Atrium Health Plan	5
	Blue Cross & Blue Shield United of Wisconsin	105
	Celtic Life Insurance Company	1
	Central Reserve Life Insurance	1
	Christian Care Medi-Share	1
	CompCare Blue	1
	Continental General Insurance Company	3
	Dean Health Plan	2
	Empire Fire and Marine Insurance Company	1
	Fortis Benefits Insurance	45
	Golden Rule Insurance Company	28
	Humana Insurance Company	54
	John Alden Life Insurance	4
	Mega Life and Health Insurance	29
	Mid-West National Life Insurance Company of	5
	Midwest Security Life Insurance	1
	Pekin Life Insurance	10
	Physicians Plus Insurance	4
	Security Health Plan	11
	United HealthCare Insurance	1
	Unity Health Plan	9
	Wisconsin Physicians Service Insurance	52
	World Insurance	1
2.	Notice of Benefit Reduction	11
3.	Notice of Premium Increase Due to a Health Reason	4
Total		705

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# **WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**

## **Restated Monthly Enrollment Through June 2005 Month End**

	Total Subsidy				Total Non-Subsidy					Combined Total			
	Plan 1A	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total
July 2004	2,959	738	3,697		5,274	8,319	989	14,582		8,233	8,319	1,727	18,279
August 2004	2,982	745	3,727		5,247	8,430	988	14,665		8,229	8,430	1,733	18,392
September 2004	2,987	750	3,737		5,242	8,501	983	14,726		8,229	8,501	1,733	18,463
October 2004	3,001	763	3,764		5,120	8,477	961	14,558		8,121	8,477	1,724	18,322
November 2004	2,989	767	3,756		5,139	8,510	965	14,614		8,128	8,510	1,732	18,370
December 2004	3,006	764	3,770		5,147	8,586	959	14,692		8,153	8,586	1,723	18,462
January 2005	2,959	747	3,706		4,713	9,134	955	14,802		7,672	9,134	1,702	18,508
February 2005	2,953	745	3,698		4,760	9,227	963	14,950		7,713	9,227	1,708	18,648
March 2005	2,967	743	3,710		4,837	9,367	962	15,166		7,804	9,367	1,705	18,876
April 2005	2,959	744	3,703		4,852	9,393	963	15,208		7,811	9,393	1,707	18,911
May 2005	2,970	738	3,708		4,934	9,523	959	15,416		7,904	9,523	1,697	19,124
June 2005	2,997	738	3,735		5,003	9,683	964	15,650		8,000	9,683	1,702	19,385

## **Detail of Total Subsidy Policies in Force as of June Month End**

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5	Total
July 2004	14,582	550	545	662	1,364	576	18,279
August 2004	14,665	547	554	664	1,392	570	18,392
September 2004	14,726	551	556	666	1,395	569	18,463
October 2004	14,558	553	548	676	1,423	564	18,322
November 2004	14,614	553	541	678	1,428	556	18,370
December 2004	14,692	554	543	685	1,432	556	18,462
January 2005	14,802	529	529	675	1,452	521	18,508
February 2005	14,950	520	526	675	1,462	515	18,648
March 2005	15,166	521	525	680	1,473	511	18,876
April 2005	15,208	516	520	685	1,479	503	18,911
May 2005	15,416	516	519	685	1,483	505	19,124
June 2005	15,650	518	523	688	1,496	510	19,385

Level 0 = Income > \$25,000

Level 1 = Income \$17,000-\$19,999

Level 2 = Income \$14,000-\$16,999

Level 3 = Income \$10,000-\$13,999

Level 4 = Income < or equal to \$9,999

Level 5 = Income \$20,000-\$24,999

**\* Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

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# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender and Age Group as of June 2005 Month End

### Male

Plan	Gender	Age Group	Number of Policyholders
1A	Male	0-24	456
1A	Male	25-29	241
1A	Male	30-34	186
1A	Male	35-39	260
1A	Male	40-44	426
1A	Male	45-49	502
1A	Male	50-54	545
1A	Male	55-59	492
1A	Male	60-64	452
1A	Male	65+	8
Total			3,568

### Female

Plan	Gender	Age Group	Number of Policyholders
1A	Female	0-24	434
1A	Female	25-29	225
1A	Female	30-34	221
1A	Female	35-39	242
1A	Female	40-44	351
1A	Female	45-49	491
1A	Female	50-54	605
1A	Female	55-59	798
1A	Female	60-64	1,037
1A	Female	65+	28
Total			4,432

Plan	Gender	Age Group	Number of Policyholders
1B	Male	0-24	284
1B	Male	25-29	66
1B	Male	30-34	78
1B	Male	35-39	158
1B	Male	40-44	310
1B	Male	45-49	488
1B	Male	50-54	681
1B	Male	55-59	911
1B	Male	60-64	1,360
1B	Male	65+	17
Total			4,353

Plan	Gender	Age Group	Number of Policyholders
1B	Female	0-24	184
1B	Female	25-29	67
1B	Female	30-34	71
1B	Female	35-39	166
1B	Female	40-44	302
1B	Female	45-49	508
1B	Female	50-54	735
1B	Female	55-59	1,229
1B	Female	60-64	2,041
1B	Female	65+	27
Total			5,330

Plan	Gender	Age Group	Number of Policyholders
2	Male	0-24	3
2	Male	25-29	11
2	Male	30-34	12
2	Male	35-39	32
2	Male	40-44	82
2	Male	45-49	112
2	Male	50-54	126
2	Male	55-59	113
2	Male	60-64	88
2	Male	65+	136
Total			715

Plan	Gender	Age Group	Number of Policyholders
2	Female	0-24	3
2	Female	25-29	4
2	Female	30-34	17
2	Female	35-39	27
2	Female	40-44	65
2	Female	45-49	98
2	Female	50-54	131
2	Female	55-59	154
2	Female	60-64	184
2	Female	65+	304
Total			987

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# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender, Zone and Age Group as of June 2005 Month End

### Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Male	0-24	28
1A	1	Male	25-29	27
1A	1	Male	30-34	19
1A	1	Male	35-39	35
1A	1	Male	40-44	47
1A	1	Male	45-49	47
1A	1	Male	50-54	46
1A	1	Male	55-59	37
1A	1	Male	60-64	31
1A	1	Male	65+	0
Total				317

### Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Female	0-24	36
1A	1	Female	25-29	31
1A	1	Female	30-34	19
1A	1	Female	35-39	19
1A	1	Female	40-44	27
1A	1	Female	45-49	38
1A	1	Female	50-54	55
1A	1	Female	55-59	76
1A	1	Female	60-64	80
1A	1	Female	65+	1
Total				382

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Male	0-24	141
1A	2	Male	25-29	80
1A	2	Male	30-34	65
1A	2	Male	35-39	78
1A	2	Male	40-44	125
1A	2	Male	45-49	138
1A	2	Male	50-54	152
1A	2	Male	55-59	135
1A	2	Male	60-64	115
1A	2	Male	65+	3
Total				1,032

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Female	0-24	152
1A	2	Female	25-29	64
1A	2	Female	30-34	79
1A	2	Female	35-39	79
1A	2	Female	40-44	117
1A	2	Female	45-49	142
1A	2	Female	50-54	172
1A	2	Female	55-59	209
1A	2	Female	60-64	295
1A	2	Female	65+	12
Total				1,321

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Male	0-24	287
1A	3	Male	25-29	134
1A	3	Male	30-34	102
1A	3	Male	35-39	147
1A	3	Male	40-44	254
1A	3	Male	45-49	317
1A	3	Male	50-54	347
1A	3	Male	55-59	320
1A	3	Male	60-64	306
1A	3	Male	65+	5
Total				2,219

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Female	0-24	246
1A	3	Female	25-29	130
1A	3	Female	30-34	123
1A	3	Female	35-39	144
1A	3	Female	40-44	207
1A	3	Female	45-49	311
1A	3	Female	50-54	378
1A	3	Female	55-59	513
1A	3	Female	60-64	662
1A	3	Female	65+	15
Total				2,729

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# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender, Zone and Age Group as of June 2005 Month End

### Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Male	0-24	17
1B	1	Male	25-29	5
1B	1	Male	30-34	9
1B	1	Male	35-39	21
1B	1	Male	40-44	26
1B	1	Male	45-49	32
1B	1	Male	50-54	40
1B	1	Male	55-59	57
1B	1	Male	60-64	81
1B	1	Male	65+	1
Total				289

### Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Female	0-24	16
1B	1	Female	25-29	10
1B	1	Female	30-34	9
1B	1	Female	35-39	6
1B	1	Female	40-44	19
1B	1	Female	45-49	33
1B	1	Female	50-54	39
1B	1	Female	55-59	71
1B	1	Female	60-64	134
1B	1	Female	65+	1
Total				338

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Male	0-24	87
1B	2	Male	25-29	15
1B	2	Male	30-34	29
1B	2	Male	35-39	50
1B	2	Male	40-44	93
1B	2	Male	45-49	141
1B	2	Male	50-54	218
1B	2	Male	55-59	235
1B	2	Male	60-64	363
1B	2	Male	65+	4
Total				1,235

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Female	0-24	62
1B	2	Female	25-29	19
1B	2	Female	30-34	23
1B	2	Female	35-39	64
1B	2	Female	40-44	89
1B	2	Female	45-49	162
1B	2	Female	50-54	233
1B	2	Female	55-59	385
1B	2	Female	60-64	573
1B	2	Female	65+	9
Total				1,619

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Male	0-24	180
1B	3	Male	25-29	46
1B	3	Male	30-34	40
1B	3	Male	35-39	87
1B	3	Male	40-44	191
1B	3	Male	45-49	315
1B	3	Male	50-54	423
1B	3	Male	55-59	619
1B	3	Male	60-64	916
1B	3	Male	65+	12
Total				2,829

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Female	0-24	106
1B	3	Female	25-29	38
1B	3	Female	30-34	39
1B	3	Female	35-39	96
1B	3	Female	40-44	194
1B	3	Female	45-49	313
1B	3	Female	50-54	463
1B	3	Female	55-59	773
1B	3	Female	60-64	1,334
1B	3	Female	65+	17
Total				3,373

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## WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

### Total Policies in Force by Plan, Gender, Zone and Age Group as of June 2005 Month End

#### Male

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Male	0-24	0
2	1	Male	25-29	1
2	1	Male	30-34	4
2	1	Male	35-39	8
2	1	Male	40-44	12
2	1	Male	45-49	16
2	1	Male	50-54	18
2	1	Male	55-59	15
2	1	Male	60-64	11
2	1	Male	65+	6
Total				91

#### Female

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Female	0-24	1
2	1	Female	25-29	0
2	1	Female	30-34	3
2	1	Female	35-39	2
2	1	Female	40-44	9
2	1	Female	45-49	12
2	1	Female	50-54	18
2	1	Female	55-59	14
2	1	Female	60-64	11
2	1	Female	65+	24
Total				94

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Male	0-24	1
2	2	Male	25-29	3
2	2	Male	30-34	4
2	2	Male	35-39	10
2	2	Male	40-44	24
2	2	Male	45-49	35
2	2	Male	50-54	39
2	2	Male	55-59	22
2	2	Male	60-64	28
2	2	Male	65+	43
Total				209

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Female	0-24	0
2	2	Female	25-29	1
2	2	Female	30-34	6
2	2	Female	35-39	10
2	2	Female	40-44	24
2	2	Female	45-49	28
2	2	Female	50-54	37
2	2	Female	55-59	50
2	2	Female	60-64	51
2	2	Female	65+	95
Total				302

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Male	0-24	2
2	3	Male	25-29	7
2	3	Male	30-34	4
2	3	Male	35-39	14
2	3	Male	40-44	46
2	3	Male	45-49	61
2	3	Male	50-54	69
2	3	Male	55-59	76
2	3	Male	60-64	49
2	3	Male	65+	87
Total				415

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Female	0-24	2
2	3	Female	25-29	3
2	3	Female	30-34	8
2	3	Female	35-39	15
2	3	Female	40-44	32
2	3	Female	45-49	58
2	3	Female	50-54	76
2	3	Female	55-59	90
2	3	Female	60-64	122
2	3	Female	65+	185
Total				591

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## WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

### Total Subsidy/Non-Subsidy Restated for June 2005 Month End

Plan		Number of Policyholders
1A	Non-subsidized	5,003
1A	Subsidized	2,997
1B	Non-subsidized	9,683
2	Non-subsidized	964
2	Subsidized	738
Total		19,385

### Total Subsidy by Level

Subsidy Level	Number of Policyholders
Level 0	15,650
Level 1	518
Level 2	523
Level 3	688
Level 4	1,496
Level 5	510
Total	19,385

	Number of Policyholders
Plan 1A, Zone 1, Non-Subsidized	379
Plan 1A, Zone 1, Subsidized	320
Plan 1A, Zone 2, Non-Subsidized	1,517
Plan 1A, Zone 2, Subsidized	836
Plan 1A, Zone 3, Non-Subsidized	3,107
Plan 1A, Zone 3, Subsidized	1,841
Plan 1B, Zone 1, Non-Subsidized	627
Plan 1B, Zone 2, Non-Subsidized	2,854
Plan 1B, Zone 3, Non-Subsidized	6,202
Plan 2, Zone 1, Non-Subsidized	88
Plan 2, Zone 1, Subsidized	97
Plan 2, Zone 2, Non-Subsidized	300
Plan 2, Zone 2, Subsidized	211
Plan 2, Zone 3, Non-Subsidized	576
Plan 2, Zone 3, Subsidized	430
Total	19,385

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# Wisconsin Health Insurance Risk Sharing Plan

## Monthly Service Report

For: June, 2005

### Customer Service/Policyholder Services

Week Ending	Calls Offered	Calls Handled	# Abandoned	% Abandoned	Average Wait (ASA)*	Longest Wait	Average Talk	Service Level**
6/3/2005	3,614	3,508	106	2.90%	00:01:12	00:09:19	00:03:57	78.90%
6/10/2005	4,911	4,648	263	5.40%	00:01:15	00:12:07	00:03:46	72.40%
6/17/2005	4,504	4,396	108	2.40%	00:00:48	00:07:49	00:03:49	85.30%
6/24/2005	4,054	3,887	167	4.10%	00:00:58	00:10:21	00:03:37	80.80%
6/27/2005	3,741	3,669	72	1.90%	00:00:40	00:10:04	00:04:01	88.10%

### Historical

02-2004	10,435	9,338	1,097	10.5 %	00:04:26	00:14:17	00:03:13	
03-2004	11,213	9,694	1,519	13.5 %	00:05:02	00:13:04	00:03:06	
04-2004	13,716	12,529	1,187	8.7 %	00:03:34	00:11:04	00:02:52	
05-2004	9,600	8,908	692	7.2 %	00:02:58	00:11:22	00:03:11	
06-2004	10,572	9,360	1,212	11.5 %	00:04:36	00:12:11	00:03:20	
01-2005	10,390	9,357	1,015	9.6 %	00:04:09	00:11:24	00:03:35	
02-2005	10,618	9,625	933	8.8 %	00:03:40	00:12:35	00:03:29	
03-2005	13,363	11,782	1,561	11.5 %	00:04:34	00:18:00	00:03:30	
04-2005	18,245	17,962	283	1.6 %	00:00:30	00:09:35	00:03:38	93.00%
05-2005	17,638	17,311	327	1.9 %	00:00:39	00:12:39	00:03:39	89.00%
06-2005	18,966	18,309	657	3.5 %	00:00:57	00:12:07	00:03:48	81.00%

### Medical Affairs Telephone

6/3/2005	125	123	2	1.60%	00:00:26	00:06:23	00:02:41	94.40%
6/10/2005	171	169	2	1.20%	00:00:27	00:03:45	00:03:01	96.40%
6/17/2005	174	169	5	2.90%	00:00:33	00:03:51	00:02:45	93.10%
6/24/2005	192	188	4	2.30%	00:04:09	00:00:00	00:02:36	95.40%
6/27/2005	173	169	4	2.30%	00:00:27	00:02:44	00:03:18	95.40%

### PBM Telephone Results

6/3/2005	264	264	0	0.00%	00:00:01	00:00:01		100.00%
6/10/2005	339	338	0	0.00%	00:00:01	00:00:20		100.00%
6/17/2005	226	224	0	0.00%	00:00:02	00:01:23		98.70%
6/24/2005	280	280	0	0.00%	00:00:01	00:00:38		99.60%
6/27/2005	336	335	0	0.00%	00:00:01	00:00:18		100.00%

All Time Formats are hh:mm:ss Historical Stats prior to April 1, 2005 have all been converted to the new format.

\* ASA = Average Speed of Answer

\*\* Service Level = Calls handled within 120 seconds divided by the number of calls offered.

\*\*\* Monthly totals are based on actual month end which is the last day of the month.

### Most Commonly Asked Questions to Customer Service/ Policyholder Services

- What is the status of my claim?
- What is the status of my application?
- What is my premium?

### Open Written Correspondence

Department	Beginning Inventory	Received	Completed	1 to 2 Days	3 to 5 Days	6+ Days	Ending Inventory
CUSTOMER SERVICE	25	195	200	3	6	11	20
MEDICAL AFFAIRS	0	1	1	0	0	0	0
POLICYHOLDER SERVICES	627	680	983	33	87	204	324

### First Call Resolution

Number of Calls Handled	First Call Resolved	Percent of Calls
12,543	11,615	92.60%

### Telephone and Written

Number of Days	Number of Inquires	Number Closed	Percentage
5	3514	3428	97.55%
2	3514	3337	94.96%

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**CLAIMS THAT HAVE FINALIZED TO PAYMENT OR DENIAL AS OF JUNE 2005 MONTH END(6/28/2005)**

	Jun 2004*	Jul 2004*	Aug 2004*	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**	May 2005**	June 2005**
	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims
<b>Plan 1A</b>													
Pharmacy											23,720	27,571	28,761
Inpatient Hospital											71	216	379
Inpatient Hospital Crossovers											2	5	3
Outpatient Hospital											2,240	2,532	2,762
Outpatient Hospital Crossovers											21	43	23
Professional											8,566	16,271	15,154
Professional Crossovers											31	115	100
Nursing Home											13	26	44
Nursing Home Crossovers											0	0	0
Miscellaneous											1,070	3,032	2,826
Miscellaneous Crossovers											4	6	8
Total Plan 1A											35,738	49,817	50,060
<b>Plan 1B</b>													
Pharmacy											20,059	23,142	24,564
Inpatient Hospital											66	169	221
Inpatient Hospital Crossovers											1	3	2
Outpatient Hospital											1,698	1,903	2,174
Outpatient Hospital Crossovers											11	24	34
Professional											6,617	13,114	12,397
Professional Crossovers											63	55	87
Nursing Home											1	11	2
Nursing Home Crossovers											0	0	0
Miscellaneous											717	1,781	1,629
Miscellaneous Crossovers											1	15	15
Total Plan 1B											29,234	40,217	41,125
<b>Plan 2</b>													
Pharmacy											12,083	13,905	14,360
Inpatient Hospital											4	10	17
Inpatient Hospital Crossovers											52	103	94
Outpatient Hospital											155	186	141
Outpatient Hospital Crossovers											771	1,233	1,236
Professional											311	525	384
Professional Crossovers											3,133	6,487	5,978
Nursing Home											6	6	8
Nursing Home Crossovers											5	18	37
Miscellaneous											252	358	344
Miscellaneous Crossovers											622	1,315	1,417
Total Plan 2											17,394	24,146	24,016
<b>Total</b>													
Pharmacy	59,962	60,942	60,172	61,367	92,799	63,286	63,621	62,372	61,359	63,736	55,862	64,618	67,685
Inpatient Hospital	377	474	383	268	612	439	540	422	462	421	141	395	617
Inpatient Hospital Crossovers	65	99	71	42	99	75	71	73	96	77	55	111	99
Outpatient Hospital	4,083	4,953	3,962	3,571	5,386	4,145	5,705	4,027	4,448	3,164	4,093	4,621	5,077
Outpatient Hospital Crossovers	1,325	1,216	935	770	1,199	975	1,598	1,015	1,211	882	803	1,300	1,293
Professional	26,837	26,033	20,637	22,116	30,612	24,387	32,229	24,762	26,193	18,349	15,494	29,910	27,935
Professional Crossovers	4,465	5,037	3,434	3,675	5,294	3,918	6,286	4,251	4,592	2,977	3,227	6,657	6,165
Nursing Home	35	18	11	16	34	18	14	31	26	29	20	43	54
Nursing Home Crossovers	7	19	14	11	36	11	11	6	4	2	5	18	37
Miscellaneous	1,835	2,278	1,823	1,286	2,120	1,921	2,405	1,817	1,842	1,948	2,039	5,171	4,799
Miscellaneous Crossovers	0	0	0	0	0	0	0	0	0	0	627	1,336	1,440
Total	98,991	101,069	91,442	93,122	138,191	99,175	112,480	98,776	100,233	91,585	82,366	114,180	115,201

\* The reporting of claims numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2005.

\*\*\*Starting this month the total number of claims in this report does not balance to the total number of claims reported in the Paid and Denied (non-pharmacy) report because a claim that has both a paid line and a denied line is counted only once in this report. It is counted once as a paid claim and once as a denied claim in the Paid and Denied (non-pharmacy) Report.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**AVERAGE CLAIMS PROCESSING DAYS AS OF JUNE 2005 MONTH END(6/28/2005)**

	Jun 2004*	Jul 2004*	Aug 2004*	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**	May 2005**	June 2005**
	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days
<b>Plan 1A</b>													
Inpatient Hospital											30.04	32.29	26.42
Inpatient Hospital Crossovers											37.00	23.25	21.66
Outpatient Hospital											11.96	10.73	8.44
Outpatient Hospital Crossovers											25.00	23.45	24.68
Professional											20.39	16.04	10.11
Professional Crossovers											23.86	18.75	14.14
Nursing Home											13.88	27.53	14.52
Nursing Home Crossovers											0.00	0.00	0.00
Miscellaneous											23.20	21.24	17.48
Miscellaneous Crossovers											36.75	24.60	29.00
Average for the Month for Plan 1A											19.09	16.19	11.02
<b>Plan 1B</b>													
Inpatient Hospital											27.56	29.74	27.46
Inpatient Hospital Crossovers											35.00	19.66	16.00
Outpatient Hospital											12.69	10.35	8.46
Outpatient Hospital Crossovers											27.63	21.20	24.16
Professional											20.50	15.15	9.72
Professional Crossovers											22.80	22.86	14.83
Nursing Home											16.00	37.66	15.00
Nursing Home Crossovers											0.00	0.00	0.00
Miscellaneous											23.74	20.84	17.49
Miscellaneous Crossovers											11.00	23.81	14.35
Average for the Month for Plan 1B											19.33	15.29	10.42
<b>Plan 2</b>													
Inpatient Hospital											24.00	68.37	21.77
Inpatient Hospital Crossovers											29.38	19.32	19.72
Outpatient Hospital											19.54	20.59	16.63
Outpatient Hospital Crossovers											25.07	16.97	17.06
Professional											25.29	23.62	21.91
Professional Crossovers											23.33	15.34	13.11
Nursing Home											21.33	18.80	18.50
Nursing Home Crossovers											22.60	14.33	19.00
Miscellaneous											19.19	21.65	18.97
Miscellaneous Crossovers											26.35	19.21	18.73
Average for the Month for Plan 2											23.91	16.77	14.99
<b>Total</b>													
Inpatient Hospital	16.00	15.00	15.00	17.00	21.00	18.00	17.00	15.00	17.00	15.00	28.58	32.01	26.68
Inpatient Hospital Crossovers	11.00	9.00	11.00	15.00	15.00	16.00	13.00	12.00	14.00	10.00	29.75	19.48	19.70
Outpatient Hospital	11.00	10.00	11.00	14.00	14.00	13.00	13.00	11.00	12.00	12.00	12.45	10.86	8.63
Outpatient Hospital Crossovers	15.00	13.00	15.00	19.00	21.00	22.00	25.00	19.00	19.00	16.00	25.10	17.25	17.38
Professional	11.00	12.00	14.00	16.00	15.00	15.00	14.00	13.00	11.00	11.00	20.53	15.78	10.05
Professional Crossovers	10.00	11.00	14.00	15.00	17.00	17.00	17.00	13.00	12.00	13.00	23.32	15.47	13.15
Nursing Home	16.00	10.00	17.00	17.00	15.00	14.00	14.00	14.00	15.00	15.00	15.76	28.24	14.90
Nursing Home Crossovers	11.00	9.00	9.00	16.00	17.00	11.00	12.00	18.00	15.00	9.00	22.60	14.33	19.00
Miscellaneous	13.00	14.00	14.00	19.00	21.00	24.00	24.00	17.00	18.00	17.00	22.97	21.12	17.57
Miscellaneous Crossovers	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26.39	19.28	18.75
Average for the Month	12.00	12.00	13.00	16.00	16.00	***16.00	16.00	13.00	14.00	12.00	20.12	16.00	11.64

\* The reporting of average processing days before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Average processing days on claims adjustments used to be reported by the previous administrator. Average processing days will not be reported on claim adjustments beginning with April 2005. Therefore, they have not been reported in this report for any month.

\*\*\* Higher than normal claim average resulting from clean up of aged medical review claims

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
HIRSP CLAIMS INVENTORY AS OF JUNE 2005 MONTH END(6/28/2005)**

Pended Claims Data	Jun 2004*	Jul 2004*	Aug 2004*	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005**	Apr 2005***	May 2005***	June 2005**
# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims
<b>Prior to Entry</b>													
Total											1,056	1,443	1,087
<b>Pre-System Suspend</b>													
Plan 1A											3,954	1,734	1,292
Plan 1B											2,946	1,284	926
Plan 2											2,318	1,035	1,420
Total										20,482	9,218	4,053	3,638
Total Over 30 Days Old											1,696	736	322
<b>System Pended</b>													
<b>Plan 1A</b>													
Inpatient Hospital											232	256	140
Inpatient Hospital Crossovers											2	2	0
Outpatient Hospital											759	660	519
Outpatient Hospital Crossovers											20	10	6
Professional											4,347	3,606	2,908
Professional Crossovers											46	34	35
Nursing Home											29	25	25
Nursing Home Crossovers											0	0	0
Miscellaneous											1,146	873	684
Miscellaneous Crossovers											3	2	11
Total Plan 1A											6,584	5,468	4,328
Total Over 30 Days Old											1,856	1,778	1,163
<b>Plan 1B</b>													
Inpatient Hospital											143	144	95
Inpatient Hospital Crossovers											2	2	1
Outpatient Hospital											495	517	397
Outpatient Hospital Crossovers											14	7	5
Professional											3,218	2,773	2,163
Professional Crossovers											23	26	16
Nursing Home											8	2	6
Nursing Home Crossovers											0	0	0
Miscellaneous											667	566	390
Miscellaneous Crossovers											7	2	2
Total Plan 1B											4,577	4,039	3,075
Total Over 30 Days Old											1,360	1,296	936
<b>Plan 2</b>													
Inpatient Hospital											3	1	3
Inpatient Hospital Crossovers											40	28	25
Outpatient Hospital											60	46	35
Outpatient Hospital Crossovers											329	252	292
Professional											147	87	128
Professional Crossovers											1,741	1,303	1,092
Nursing Home											2	3	2
Nursing Home Crossovers											18	19	8
Miscellaneous											109	101	62
Miscellaneous Crossovers											557	429	321
Total Plan 2											3,006	2,269	1,968
Total Over 30 Days Old											694	526	329
<b>Total</b>													
Inpatient Hospital	112	99	129	230	228	142	127	169	170	0	378	401	238
Inpatient Hospital Crossovers	14	13	8	19	17	7	15	22	16	0	44	32	26
Outpatient Hospital	609	818	983	1,040	1,002	963	699	969	650	0	1,314	1,223	951
Outpatient Hospital Crossovers	214	256	422	447	581	540	247	403	275	0	363	269	303
Professional	3,104	5,690	7,073	7,344	8,292	6,457	5,872	5,322	3,600	0	7,712	6,466	5,199
Professional Crossovers	381	836	1,587	1,483	1,643	1,564	580	1,190	668	0	1,810	1,363	1,143
Nursing Home	1	6	7	9	8	4	15	13	10	0	39	30	33
Nursing Home Crossovers	2	2	1	6	2	2	3	1	0	0	18	19	8
Miscellaneous	449	379	617	863	1,137	865	728	836	845	0	1,922	1,540	1,136
Miscellaneous Crossovers	0	0	0	0	0	0	0	0	0	0	567	433	334
Total	4,886	8,099	10,827	11,441	12,910	10,544	8,286	8,925	6,234	0	14,167	11,776	9,371
Total Over 30 Days Old	1,435	1,198	989	1,437	1,813	1,897	651	868	467	0	5,606	4,336	2,428
<b>Grand Total</b>	4,886	8,099	10,827	11,441	12,910	10,544	8,286	8,925	6,234	20,482	24,441	17,272	14,096

\* The reporting of inventory numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Prior administrator claim inventory is zero due to transition of plan administration to WPS. 1,807 claims were pending and transferred to WPS on March 31st. WPS received 20,482 HIRSP claims from providers and the prior administrator during the period 3/14/2005 - 3/31/2005.

\*\*\* Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## MEDICAL CLAIMS DENIED REPORT\*

As of June 2005 Month End(6/28/2005)

Processed Month	Plan 1A		Plan 1B		Plan 2		All Plans			Denial Rate
	Paid	Denied	Paid	Denied	Paid	Denied	Paid	Denied	Total	
June 2004	14,320	5,412	8,906	3,554	4,796	2,041	28,022	11,007	39,029	28.2%
July 2004	14,539	5,511	9,098	3,723	4,916	2,340	28,553	11,574	40,127	28.8%
August 2004	11,258	4,409	7,199	3,018	3,743	1,643	22,200	9,070	31,270	29.0%
September 2004	11,398	4,318	7,676	3,016	3,924	1,423	22,998	8,757	31,755	27.6%
October 2004	16,461	5,752	11,535	3,880	5,751	2,013	33,747	11,645	45,392	25.7%
November 2004	12,686	4,232	9,584	3,458	4,389	1,540	26,659	9,230	35,889	25.7%
December 2004	16,889	5,819	12,715	4,376	6,458	2,602	36,062	12,797	48,859	26.2%
January 2005	12,980	4,239	9,710	3,192	4,542	1,741	27,232	9,172	36,404	25.2%
February 2005	12,985	5,197	9,862	3,935	4,884	2,011	27,731	11,143	38,874	28.7%
March 2005	9,529	3,403	7,389	2,752	3,297	1,479	20,215	7,634	27,849	27.4%
April 2005	10,223	2,143	7,789	1,678	4,185	1,109	22,197	4,930	27,127	18.2%
May 2005	18,903	4,196	14,308	3,387	7,814	2,475	41,025	10,058	51,083	19.7%
June 2005	18,296	3,908	14,232	3,010	7,388	2,385	39,916	9,303	49,219	18.9%

\* Claims denied by the PBM are not included. See page 30 for claims denied by the PBM.

A claim may have some paid lines and some denied lines. Therefore, a claim that has both paid and rejected lines has been counted as a paid claim and as a denied claim. This results in more total claims being reported in this report than in the report titled Claims That Have Finalized to Payment or Denial Report.

## END OF MONTH JUNE 2005 DENIAL REASON DETAIL

Denial Reason	Volume	Top 10 Reasons for Denial
18/DU	3,737	DUPLICATE CLAIM/SERVICE
23	899	CLAIM DENIED/REDUCED BECAUSE CHARGES HAVE BEEN PAID BY ANOTHER PAYER AS PART OF COORDINATION OF BENEFITS
49	768	NONCOVERED SERVICES BECAUSE THIS IS A ROUTINE EXAM OR SCREENING PROCEDURE DONE IN CONJUNCTION WITH A ROUTINE EXAM
51	695	THIS IS A PREEXISTING CONDITION. MEDICAL RECORDS OBTAINED FROM YOUR PROVIDER HAVE IDENTIFIED A PRE-EXISTING CONDITION
EM	483	WE NEED THE MEDICARE EXPLANATION OF BENEFITS TO PROCESS THIS CHARGE
27/28	400	EXPENSE(S) INCURRED OUTSIDE COVERAGE PERIOD ARE NOT COVERED
IS	329	THIS PROCEDURE IS INCIDENTAL TO AND CONSIDERED PART OF THE PRIMARY PROCEDURE
HW	216	SERVICES PERFORMED BY A PROVIDER THAT IS NOT MEDICAID CERTIFIED ARE NOT COVERED
V1	182	PRIMARY SERVICE CODE INCLUDES THE OTHER SERVICES BILLED, NO PAYMENTS HAVE BEEN ALLOWED FOR THE OTHER SERVICES
35	155	BENEFIT MAXIMUM HAS BEEN MET FOR THIS SERVICE/THE PATIENT IS RESPONSIBLE FOR PAYMENT

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



## WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

### PHARMACY CLAIMS DENIED REPORT

As of June 2005 Month End(6/30/2005)\*

Processed Month	Denied
June 2004	8,148
July 2004	8,570
August 2004	8,297
September 2004	9,048
October 2004	13,104
November 2004	8,873
December 2004	8,555
January 2005	8,664
February 2005	7,627
March 2005	8,304
April 2005	25,472
May 2005	21,252
June 2005	16,979

### END OF MONTH JUNE 2005 DENIAL REASON DETAIL

Top 10 Reasons for Denial	Volume
DUR Rejected Error-Interaction Drugs	7,002
Plan Limitation Exceeded	4,213
NDC Not Covered	2,337
Refill Too Soon	1,313
Missing/Invalid Dispense as Written Code	631
Duplicate Paid/Captured Claim	246
Non-Matched Cardholder ID	240
Submit Bill to Other Processor/Primary Payer	189
Missing/Invalid Sex Code	139
Filled After Coverage Terminated	136

\* Each prescription processed and denied is counted as one claim

**Note the different end of month date from previous reports in this packet.  
This is due to these figures being taken from a production PBM report  
rather than from the current HIRSP plan administrator's reporting files.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Claims Accuracy Performance June 2005

### Medical

Month	Total Number of Claims	Total Claim Payments	Total Claim Payments Reviewed	Total Correct Payments	Accuracy Rate
July-2004	40,127	\$7,059,137.00	\$80,036.00	\$80,036.00	100
August-2004	31,270	\$5,264,531.00	\$49,875.00	\$49,875.00	100
September-2004	31,755	\$4,024,798.00	\$86,524.00	\$86,524.00	100
October-2004	45,392	\$8,169,270.00	\$63,287.00	\$63,287.00	100
November-2004	35,889	\$6,631,268.00	\$79,182.00	\$79,156.00	99.97
December-2004	48,859	\$9,595,500.00	\$52,645.00	\$52,645.00	100
January-2005	36,404	\$6,551,366.00	\$95,201.00	\$95,201.00	100
February-2005	38,874	\$6,256,306.00	\$80,016.00	\$80,016.00	100
March-2005	27,849	\$5,125,139.00	\$58,769.00	\$58,769.00	100
April-2005	28,646	\$4,001,294.29	\$67,258.90	\$67,605.30	99.49
May-2005	46,570	\$8,593,111.00	\$77,521.77	\$76,450.29	98.60
June-2005	44,024	\$10,505,466.00	\$66,752.92	\$64,063.42	99.06
<b>Quarterly Total</b>	<b>119,240</b>	<b>\$23,099,871.29</b>	<b>\$211,533.59</b>	<b>\$208,119.01</b>	<b>99.37%</b>

\* This report is prepared on a processed date basis using all dates in a calendar month versus other reports that are prepared on a schedule that uses the standard end of month processing dates. Therefore, claims data in this report will not agree with claims data on other reports.

# Wisconsin Health Insurance Risk Sharing Plan

## Appeals and Grievance

June, 2005

### Claim Appeals

Total Claim Appeals Received	45
Billing/Claim Processing	3
Drug & Drug Formulary	13
Enrollment/Eligibility Requirements	6
Experimental Treatment	2
Not Covered Benefit	2
Not Medically Necessary	5
Plan Administration	9
Prior Authorization	5
 Total Claims/Reinstatements Closed	 35
Claim Appeals Average Number of Days	9.342

### Grievances

Grievance Committee	
Billing/Claim Processing	2
Drug & Drug Formulary	1
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